

GENERAL FACT SHEET

BILL NUMBER 13R-226

BRIEF TITLE	APPROVAL DEADLINE	REASON
The Annual Requirements of StarTran's Special Transportation Programs		Two (2) Year Contract

DETAILS

POSITIONS/RECOMMENDATIONS

Resolution to provide The Annual Requirements for Administration of StarTran's Special Transportation Programs , for the Public Works & Utilities Department as per Bid No. 11-204 , for a two (2) year term beginning at the execution of the contract. This service will be used by StarTran with a cost of \$83,024.00 for the two (2) year term.	Sponsor	Purchasing
	Program Departments, or Groups Affected	Aging
	Applicants/Proponents	Applicant: Purchasing City Department: Aging
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommend.	x For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommend.	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

DETAILS

POLICY/PROGRAM IMPACT

Resolution to provide The Annual Requirements for Administration of StarTran's Special Transportation Programs , for the Public Works & Utilities Department as per Bid No. 11-204 , for a two (2) year term beginning at the execution of the contract. This service will be used by StarTran with a cost of \$83,024.00 for the two (2) year term.	POLICY OR PROGRAM CHANGE	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____ _____
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ 83,024.00 COST of this Ordinance/ Resolution \$ 41,512.00 per yr. \$ 83,024.00
		RELATED annual operating Costs \$
		INCREASE REVENUE EXPECTED/YEAR \$
SOURCE OF FUNDS	CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % NON CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %	
	BENEFIT COST <input type="checkbox"/> Front Foot Assessment Average <input type="checkbox"/> Square Foot \$ _____ \$ _____	

APPLICABLE DATES:

FACT SHEET PREPARED BY: Kim Wilnes

REVIEW BY:

Steve Kubler

REFERENCE NUMBER